

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>NS</i>	<i>115</i>	<i>12/23</i>
FORMALITY REVIEW	<i>AS</i>	<i>901</i>	<i>01/26/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/23/00
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8	✓	✓	12/23/00
9	✓	✓	12/23/00
10	✓	✓	12/23/00
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13	✓	✓	12/23/00
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20	✓	✓	12/23/00
21	✓	✓	12/23/00
22	✓	✓	12/23/00
23			
24	✓	✓	12/23/00
25	✓	✓	12/23/00
26	✓	✓	12/23/00
27	✓	✓	12/23/00
28	✓	✓	12/23/00
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38	✓	✓	12/23/00
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47	✓	✓	12/23/00
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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